

DECLARATION FOR UTILITY OR DESIGN
PATENT APPLICATION (37 CFR 1.63)

Attorney Docket No.: 2132.109
Inventor Name: Jackowski et al.
COMPLETE IF KNOWN
Application No:
Filing Date:
Group Art Unit:
Examiner Name:

☒ Decl. Sub. w/Initial Filing
☐ Decl. Sub. after Initial Filing (surcharge (37 CFR 1.15 (e)))

As a below named inventor, I hereby declare that:

My residence, post office addr., and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

FIBRINOGEN BIOPOLYMER MARKER PREDICTIVE OF TYPE II DIABETES

the specification which

☒ is attached hereto OR
_____ was filed on _____ As United States Application No. or PCT Intl. Appln. No. _____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

PRIOR FOREIGN NUMBERS:	COUNTRY:	FOREIGN FILING DATE:	PRIORITY NOT CLAIMED:	CERTIFIED COPY Yes No
			_____ _____ _____	_____ _____ _____

Additional foreign appln. nos. are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below:

APPLICATION NUMBER(s): FILING DATE:

____ Addnl. provisional appln.
Nos. are listed on a
Supplementary priority data
Sheet PTO/SB/02B attached.

[illegible]

U.S. PARENT APPLICATION or PCT NUMBER:	PARENT FILING DATE:	PARENT PATENT NO: (if applicable)
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OR

Page 2 of 3

NAME OF SECOND INVENTOR: _____ A Petition has been filed for this unsigned inv.
GIVEN NAME (first and middle [if any]): _____ FAMILY NAME OR SURNAME: _____

John _____ Marshall, PhD _____
Inventor's signature: _____ Date: _____
Residence: 95 Parkside Drive _____
City: Toronto _____ State: ONTARIO M6R 2V3 _____ Country: CANADA _____ Citizenship: Canadian _____
Post Office Address: 95 Parkside Drive, Toronto Ontario M6R 2V3, CANADA _____
Additional inventors are being named on the _____ Supplemental additional inventor(s) _____